

**HAWAII STATE ETHICS COMMISSION**  
1001 BISHOP STREET, ASB TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
TEL: 587-0460 FAX: 587-0470  
email: ethics@hawaiiethics.org

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STATE OF HAWAII  
STATE ETHICS COMMISSION

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## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

|   |         |            |           |
|---|---------|------------|-----------|
| <b>PART I LOBBYIST</b>  |         |            |           |
| NAME (Last)   | (First) | (Middle)   | TELEPHONE |
| WADA  | RYKER   | J.         | 536-4302  |
| MAILING ADDRESS (Street)  |         |            | FAX       |
| 924 Bethel Street   |         |            | 527-8088  |
| (City)  | (State) | (Zip Code) |           |
| Honolulu  | HI      | 96813      |           |
| EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) |         |            | TELEPHONE |
| Legal Aid Society of Hawaii   |         |            | 536-4302  |
| MAILING ADDRESS (Street)  |         |            | FAX       |
| 924 Bethel Street   |         |            | 527-8088  |
| (City)  | (State) | (Zip Code) |           |
| Hon   | HI      | 96813      |           |

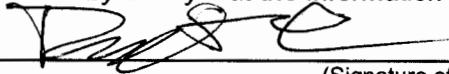
|  |         |            |           |
|--|---------|------------|-----------|
| <b>PART II ORGANIZATION</b>  |         |            |           |
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)                         |         |            | TELEPHONE |
| Legal Aid Society of Hawaii  |         |            | 536-4302  |
| MAILING ADDRESS (Street)   |         |            | FAX       |
| 924 Bethel Street  |         |            | 527-8088  |
| (City)   | (State) | (Zip Code) |           |
| Hon  | HI      | 96813      |           |
| NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT |         |            | TELEPHONE |
| Wayne Keawe  |         |            | 527-8060  |
| MAILING ADDRESS (Street)   |         |            | FAX       |
| 924 Bethel Street  |         |            | 527-8088  |
| (City)   | (State) | (Zip Code) |           |
| Hon  | HI      | 96813      |           |

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Agriculture                               | <input type="checkbox"/> Education                                  | <input type="checkbox"/> Human Services                                     | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities         | <input checked="" type="checkbox"/> Government Operations & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                       |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input checked="" type="checkbox"/> Hawaiian Affairs                | <input type="checkbox"/> Labor & Employment                                 | <input type="checkbox"/> Transportation                             |
| <input type="checkbox"/> Culture, Arts, Historic Preservation      | <input type="checkbox"/> Health                                     | <input type="checkbox"/> Planning, Land & Water Use Management              | <input type="checkbox"/> Other: (indicate below)                    |
| <input type="checkbox"/> Ecology, Energy Environmental Protection  | <input checked="" type="checkbox"/> Housing                         | <input type="checkbox"/> Public Safety & Corrections                        |   |

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

1/29/05

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

M. Nalani Fujimori

DEPUTY DIRECTOR

NAME OF ORGANIZATION (if applicable)

TELEPHONE

Legal Aid Society of Hawaii

527 8014

MAILING ADDRESS (Street)

FAX

924 Bethel St.

527 8088

(City)

(State)

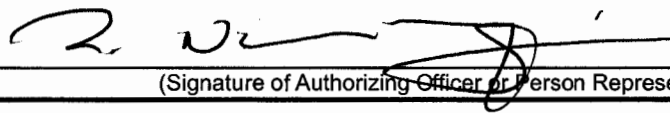
(Zip Code)

Honolulu

HI

96813

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

1/31/05

(Date)